Government of Saskatchewan

Annual Report
1985-86

Saskatchewan Health

Community Services
Swift Current Region

SWIFT CURRENT HEALTH REGION

ANNUAL REPORT

1985-86

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MESSAGE FROM THE CHAIRMAN OF THE BOARD

Throughout the past year, five Regional Board Meetings were held; an Annual Meeting; four District Council Meetings and the Orientation Seminar. Also, two Board Members attended the Field staff Conference and Saskatchewan Public Health Association Meeting in Saskatoon.

The Orientation Seminar for District Health Representatives held in December was very informative and all those attending indicated they would like to have this inservice continued. Attendance was fair, considering the wintry weather conditions, however, the Board has requested that future seminars be held in October.

Topics suggested by the Board for discussion at the fall inservice are: drug and alcohol abuse amongst children and adolescents; the high incidence of unwed mothers and to promote non-smoking by encouraging the public not to start smoking. The Board decided to make non-smoking their annual theme.

The Board has accepted the application of Mrs. Colette Anderson of Frontier who has applied for the physical therapy bursary. She will be the recipient of a two year bursary upon commencing employment in this Region.

On behalf of the Regional Board, I want to thank Community Health Services personnel for the excellent delivery of services to the communities they serve. We look forward to helping promote health issues in the coming year.

Respectfully submitted

J. J. Kurtz
Board Chairman

MEMBERS OF THE REGIONAL BOARD OF HEALTH

Mr. J. Kurtz ..... Chairman
Mr. A. Lockhart ..... Vice Chairman
Mrs. W. Popein ..... Executive Director

City

Swift Current ..... Mr. M. Hinds
366 - 5th Avenue Southeast
Swift Current

Villages

Cabri ..... Mrs. R. Kirkpatrick
Cabri

Bracken ..... Mr. G. Shuttleworth
Bracken

Sceptre ..... Mr. E. Howes
Sceptre

Success ..... Mr. E. Garland
Success

Tompkins ..... Mr. J. Kimber
Tompkins

Rural Municipalities

White Valley No. 49 ..... Mr. D. Girard
Eastend

Arlington No. 79 ..... Mr. R. Thienes
Box 91, Shaunavon

Sask. Landing No. 167 ..... Mr. J. Barber
Stewart Valley

Riverside No. 168 ..... Mrs. S. Williams
Pennant

MUNICIPAL HEALTH REPRESENTATIVES

LEADER DISTRICT

Towns

Burstall ..... Mr. A. Jassman
Box 132, Burstall

Cabri ..... Mrs. R. Kirkpatrick
Cabri

Leader..... Mr. M. Clary
Box 41, Leader

Villages

Abbey ..... Mr. R. Brawn
Abbey

Fox Valley ..... Mr. T. Koch
Fox Valley

Hazlet .....

Mendham ..... Mr. S. Stroh
Box 66, Mendham

Prelate .....

Richmound ..... Mr. L. Franz
Box 21, Richmound

Sceptre ..... Mr. E. Howes
Sceptre

Shackleton ..... Mr. S. Morrey
Shackleton

Rural Municipalities

Enterprize No. 142 ..... Mr. H. Flaig
Box 237, Golden Prairie

Pittville No. 169 .....

Fox Valley No. 171 ..... Mr. R. Hellman
Box 52, Richmound

Miry Creek No. 229 ..... Mr. D. Barr
Abbey

Rural Municipalities

Clinworth No. 230 ..... Mrs. S. Watson
Abbey

Happyland No. 231 ..... Mr. J. Kurtz
Box 40, Mendham

Deer Forks No. 232 ..... Mr. R. Ehnisz
Burstall

MUNICIPAL HEALTH REPRESENTATIVES

MAPLE CREEK DISTRICT

Towns

Gull Lake ..... Mr. E. Douglas
Gull Lake

Maple Creek ..... Mr. J. Mordasiewicz
Box 444, Maple Creek

Villages

Carmichael ..... Mr. H. Haney
Box 517, Gull Lake

Golden Prairie .... Mr. L. Oddan
Golden Prairie

Piapot ..... Mr. R. Mudryk
Piapot

Tompkins ..... Mr. J. Kimber
Tompkins

Rural Municipalities

Carmichael No. 109 ..... Mr. J. Lundy
Box 39, Tompkins

Piapot No. 110 ..... Mr. B. Wolfater
Tompkins

Maple Creek No. 111 ..... Mr. J. Schock
Box 1016, Maple Creek

Gull Lake No. 139 ..... Mrs. C. Springer
Gull Lake

Big Stick No. 141 ..... Mr. A. Lockhart
Box 636, Maple Creek

MUNICIPAL HEALTH REPRESENTATIVES

SHAUNAVON DISTRICT

Towns

Eastend ..... Mr. C. Thompson
Eastend

Shaunavon ..... Mr. J. Greenslade
Box 941, Shaunavon

Villages

Admiral ..... Mr. I. Spetz
Box 44, Admiral

Bracken ..... Mr. G. Shuttleworth
Bracken

Climax ..... Mr. K. Mything
Climax

Consul ..... Mrs. C. Funk
Box 185, Consul

Dollard ..... Mr. R. Goulet
Box 4, Dollard

Frontier ..... Mr. D. Stengler
Frontier

Robsart ..... Mr. E. Syverson
Robsart

Val Marie ..... Mrs. L. Carlier
Box 178, Val Marie

Rural Municipalities

Val Marie No. 17 ..... Mrs. D. Kornfeld
Val Marie

Lone Tree No. 18 ..... Mr. B. Brown
Climax

Frontier No. 19 ..... Mr. E. Nelson
Frontier

Glen McPherson No. 46 ..... Mr. G. Stinson
Ponteix

Rural Municipalities

White Valley No. 49 ..... Mr. D. Girard
Eastend

Reno No. 51 .....

Grassy Creek No. 78 ..... Mr. L. Meloche
Box 400, Shaunavon

Arlington No. 79 ..... Mr. R. Thienes
Box 91, Shaunavon

Bone Creek No. 108 ..... Mr. B. Meinert
Box 837, Shaunavon

MUNICIPAL HEALTH REPRESENTATIVES

SWIFT CURRENT DISTRICT

City

Swift Current ..... Mr. M. Hinds
366 - 5th Avenue Southeast
Swift Current

Towns

Ponteix ..... Mr. D. Boisjoli
Ponteix

Villages

Aneroid ..... Mr. J. McMillan
Aneroid

Cadillac ..... Mrs. V. Kendall
Cadillac

Neville ..... Mr. I. Dyck
Box 123, Neville

Pennant ..... Mr. G. Rose
Pennant

Rush Lake .....

Stewart Valley ..... Mr. W. Kreuger
Box 40 Stewart Valley

Success ..... Mr. E. Garland
Success

Vanguard ..... Mr. R. Kehoe
Box 184, Vanguard

Waldeck ..... Mrs. K. Lang
Waldeck

Webb ..... Mr. B. Jewitt
Box 32, Webb

Rural Municipalities

Auvergne No. 76 ..... Mr. B. Raymond
Aneroid

Wise Creek No. 77 ..... Mr. K. Kendall
Box 98, Cadillac

Rural Municipalities

Glen Bain No. 105 ..... Mr. J. Scheller
Vanguard

Whiska Creek No. 106 ..... Mr. J. Holenski
Vanguard

Lac Pelletier No. 107.. Mr. H. Hildebrandt
Box 40, Blumenhof

Coulee No. 136 ..... Mr. V. Wilson
Site 4, Box 5, Swift Current

Swift Current No. 137 ..... Mr. G. Bulin
873 - 9th Avenue Northeast
Swift Current

Webb No. 138 ..... Mr. B. Jewitt
Box 32, Webb

Excelsior No. 166 ..... Mr. D. Meyer
Box 98, Rush Lake

Sask. Landing No. 167 ... Mr. J. Barber
Stewart Valley

Riverside No. 168 .... Mrs. S. Williams
Pennant

ANNUAL REPORT REGIONAL EXECUTIVE DIRECTOR 1985-86

The 1985-86 fiscal year has been one of change, growth and development.

I am pleased to announce that after two years of planning, organizing and documenting, the Swift Current Mental Health Region has been successful in achieving a two-year accreditation award bestowed upon us by the Canadian Council on Hospital Accreditation. All staff are to be complimented for this achievement. We are now concentrating on our quality assurance program.

The new core services program has been initiated by the Community Health Services Branch. This is a well organized program aimed at ensuring that pre-school age children receive immunization. Also, to ensure that all pre-school age children receive psychological and physical evaluations. The public health nurses are to be complimented for assisting in the successful initiation of this updated program.

A new elderly treatment program has been initiated within the Swift Current Mental Health Region. We believe this is the first such program in the province. It involves both the urban and rural areas. Supportive and consultative services will be provided to agencies concerned with the treatment of the elderly.

The 1985-86 fiscal year has been a difficult year for the budget. Due to our economic recession, we have rationalized resources while still ensuring the provision of our mandated services to the public. I am pleased to report that inspite of budget restrictions, our region controlled its finances in a responsible manner.

This is the third year with the concept of one administration for both mental health and community health services. This unique administrative structure continues to demonstrate that there are areas of commonality, that when organized, have a positive impact on resource sharing and program communications.

In closing, I would like to thank the staff of mental health services and community health services for such a productive year. I would like to thank central office staff for their support and guidance. Also, it has been a pleasure working with the Regional Board and I am looking forward to a good year in 1986-87.

Respectfully submitted.

Lee K. Spencer
Regional Executive Director

MEDICAL HEALTH OFFICER'S ANNUAL REPORT, 1985-86

As your non-resident Medical Health Officer, I have attempted to serve this region in various ways. Primarily this has been through weekly obligations in my home region as well as provincial demands. The new centrex system in Moose Jaw has allowed significant increases in phone conferences with Swift Current staff. Finally, the location of the shared Senior Public Health Inspector in Moose Jaw has facilitated conferencing in that location.

Health protection through compliance with regulation has been of concern through incomplete inspection staff. A few operators of public premises require strict surveillance. One restaurant was issued legal orders to clean up, but discontinued operation before we applied statutory closure. In public water supplies, several communities still resist mandatory chlorination. We have worked closely with Department of Environment officials who have final authority for enforcement. We stand ready to warn the public should overt hazards appear.

Vital statistics are summarized in Table VI. Total population decreased by 459, although births exceeded deaths by 282, indicating out-migration from the region. Deaths are analysed by cause in Table VIII. Although total deaths have declined slightly, there are no major trends as to cause. Accidental deaths numbering 22, are slightly elevated. Of significance are the young ages at which they occur, with loss of potential years of life.

Reported cases of notifiable communicable diseases are listed in Table VII. It has been a comparatively good year. Chicken-pox shows cyclically decreased frequency. Pediculosis, while less frequently reported still appears in widely scattered areas.

Rabies is widespread in animals especially in the western part of the region. Reported positive specimens consisted of one dog, three bovine, and 63 skunks, a total of 67 compared with 27 in the previous fiscal year. Human vaccine was issued in 42 doses, compared to 106 in the previous fiscal year. One hopes this reflects improved caution in avoidance of unnecessary exposure to possibly rabid animals.

Two cases each of syphilis, gonorrhea and tuberculosis were reported.

I wish to express my appreciation for the work done during the year by members of the Swift Current team.

Respectfully submitted

Dr. J. N. Burkholder

PUBLIC HEALTH NURSING

ANNUAL REPORT, April 1985 - March 1986

Throughout the past year, Health Region #1 has experienced many changes, both in terms of programs and nursing positions.

Position Changes

As of April 1, 1985, I assumed the position of Public Health Nurse II which had been vacant since September 30, 1984. Della Stumborg left her Shaunavon position as Public Health Nurse I effective April 16, 1985. On August 12, 1985 we welcomed Carolyn Gabriel into the Public Health Nurse I position in Shaunavon. The Swift Current Public Health Nurse I staff position was lost to another health region permanently.

Deb Schroeder was granted education leave in September, 1985 to attend the University of California. Jennifer Heinrichs filled the position on a temporary basis on October 1, 1985.

We were sorry to see Dolores Ast leave her position as Regional Nursing Supervisor in September, but wished her well as she became a nursing consultant with Public Health in Regina. Her many years of service will always be remembered.

I was pleased to accept the Regional Nursing Supervisor's position effective November 25, 1985. This created a vacancy in the Public Health Nurse II position and this position has not been filled to date.

On January 20, we were sorry to see Carolyn Gabriel transfer to Rosetown Health Region from Shaunavon. At the time of this writing, the position in Shaunavon is still vacant.

Program Changes

The main thrust in programming this year has been with respect to the preschool core services. The main goal of the program is to provide a comprehensive health service to all preschool children in the province. Seven main elements are involved - immunization, physical assessment, nutrition screening, speech and language screening, developmental screening and hearing and vision screening. The standardized format of the program provides more uniformity between the regions and has an additional benefit in terms of assisting the supervisor with performance appraisal of the staff.

The more in-depth service has necessitated increasing our CHC appointment times from 20 minutes to 30 minutes.

The revised nursing manual has been a welcome addition and a valuable reference for the program interpretation. Our immunization rates for preschoolers were up this year in spite of some adverse publicity regarding the pertussis vaccine.

Prenatal Classes

A standardized prenatal manual is being developed provincially and this will be implemented in the 1986-87 year.

Prenatal class enrollment and home visits declined slightly from last year. Prenatal refresher classes were cancelled due to staff vacancies.

Postnatal and Infant Services

Postnatal home visits were down significantly from previous years. The number of contacts by telephone or other means remained about the same. Increased clinic time and staff vacancies may have contributed to this decline in service.

School Services

School services were reduced to approximately half the time in order to allow for increased emphasis on the preschool programs through Child Health Conferences. Meetings have been held with the school superintendents and other personnel to try and improve communication and continuity of service.

"Peer Counselling" was implemented in Swift Current as a service in the high school and the Public Health Nurses along with other agencies have been actively involved in helping the students. Another area the Public Health Nurses have been involved is the "Health Is It" program to try and assist students to become more involved in their own health programs in the schools.

Adult Services

Most of our adult home visits seem to entail the delivery of S.A.I.L. equipment, especially to those clients who require respiratory equipment.

Adult clinics were reviewed and reduced to one-half the time. We continue to feel the clinic offers a worthwhile service to the elderly in this region. Well-Elderly Clinics are held in Swift Current, Burstall, Piapot, Tompkins and Pennant.

Communicable Disease

In March of this year, Tuberculosis follow-up was reviewed with Dr. Vern Hoeppner and Mrs. Graham, the newly appointed director and nursing co-ordinator of T.B. services in Saskatchewan. The Public Health Nurses will assume a more predominent role in follow-up and contact tracing.

Other Activities

Eight nursing students from the University of Saskatchewan spent approximately five weeks in the region in May, 1985. It was a worthwhile experience for all concerned.

Swift Current Health Region #1 were once again the recipients of the Davidson Cup award - a provincial trophy that is awarded to the health region that collects the most points that contribute toward a healthy lifestyle.

Public Health Nurses continue to be involved in the District Co-ordinating Committees. These Committees provide individuals in the community with one entry point in the long-term care system.

With all the changes, the Public Health Nurses have displayed a true spirit of collegiality that is worthy of mention. I would like to thank all the staff of Community Health Services for their co-operation and support this past year.

Respectfully submitted

Joan Whiteside

PUBLIC HEALTH INSPECTION

As you are aware, staffing continues to be a problem in this region. You will recall that in September, 1984, we lost one inspection position (Shaunavon) and also lost half of a Senior Inspector's position. The headquarters, formerly in Maple Creek, has been officially transferred to Shaunavon but has not been filled to date.

Mr. Martin McLeod left our staff in July, 1985. He was temporarily filling the Maple Creek/Shaunavon District office. Mr. W. Cave covered this area from August 1, 1985, until November 15, 1985.

Mrs. R. Galbraith was on maternity leave from May 13, 1985, to November 13, 1985. She was replaced for three months by Mr. Chris Brown who worked from June 1, 1985, to August 31, 1985.

Mr. W. Stroh began working on a casual basis on October 22, 1985, and is still working in that capacity. He works for four days every other week in the Maple Creek/ Shaunavon District.

We certainly appreciated and continue to appreciate the help from these part-time people; however, we are in need of obtaining a permanent employee for the Maple Creek/ Shaunavon office. To date, we have been unsuccessful in filling the position and it is now frozen and under appeal.

Due to the shortage of staff and the distance which must be covered, most of our year has been spent running around trying to keep up with demand type of service. We have been fortunate in that our inspectors are fairly up to date in most areas. Re-inspections and follow-up inspections have not been up to the levels that we would like to perform but that is the price which we have to pay for restraint.

The investigation of male contacts of sexually transmitted diseases is taking up an increasing proportion of time. This involves contacting the person; explaining the type of disease, symptoms, etc.; and obtaining a list of contacts who are, in turn, followed up.

We conducted four Food Handlers Courses this past year. A total of 28 people attended and successfully completed the course. We are disappointed in this turnout but it could be as a result of the present economic restraint.

Three Pool Operators Courses were held in the region last summer and 15 people attended and successfully completed the course.

A short statistical review appears at the end of this report.

John Bower
Public Health Inspector II

SPEECH-LANGUAGE PATHOLOGIST ANNUAL REPORT 1985-86

The Speech-Language Pathology Department found new quarters this year. Although facilities were ample, the location of the testing/therapy room was not quite suitable. The room was adjacent to a heavy traffic area which resulted in distractible noise; therefore, the testing/therapy room is now situated toward the rear of our office space and is very quiet. We maintain the convenience of an observation room for parents and have acquired additional child size furniture.

Regular meetings throughout the year included the Early Childhood Committee, E.C.I.P., Southwest Regional Therapists and the Shared Services Speech-Language Pathologists.

The Community Health Services Branch, Speech-Language Pathologists were also pleased to obtain a Director this year after a two year vacancy. Ms. Kelly Richter has been Acting Director during the year and has been a great asset to us. We have resumed regular meetings and have been relieved of a lot of administration activities since her appointment.

Screening playschool children in Frontier and Swift Current seems to have become a regular annual activity. The children are between ages three and four and attend playschool two to three half days a week. Community Health Services Branch has implemented a Core Screening program which is being carried out by the Public Health Nurses. One section of the screening is communication and all three year old children are screened for speech and language development. Those in need of further testing are referred to the Speech-Language Pathologist. As anticipated, the number of referrals has increased significantly.

Shaunavon and Maple Creek Clinics were held bi-weekly and Leader Clinics were added in September because of the increase in demand of Speech-Language Pathology services. Since the Kindersley vacancy was filled in November, Ms. L. Olson has resumed regular clinics in Leader.

There had been an increase in case conferences of a special nature this past year. Some included meetings with School Personnel, Psychoeducational Assessment Clinic, and Saskatchewan Pre-School Auditory Rehabilitation Clinic to discuss services for an early entrant, i.e. three year old, hard of hearing child.

An increase in requests also came from nursing homes and Rehabilitation Services for adults requiring alternate methods of communication. Several visits were also made to school divisions to discuss programs for special needs children. Swift Current was also fortunate this year in hosting the Alvin Buckwold Travelling Clinic. This is always a good experience for local resource persons in that it provides opportunities to discuss difficult cases and also to participate in diagnosis and remediation for each child.

As new staff joins our health region, we provide an orientation with each department. This past year, orientation to Speech-Language Pathology services was given to Public Health Nurses and Public Health Inspector students, the nutritionist, J. Ayer, and the new Speech-Language Pathologists in Kindersley and Southwest Shared Services.

Another activity which is always enjoyable is public speaking to interested groups. Some of these were, Personal Best Fitness Centre staff re: voice abuse and proper use; Sask Tel Pioneers re: special electronic aids for non-verbal persons; Beta Sigma Phi re: mild hearing loss in children; and Prenatal update classes re: profile of a two year old.

As Speech-Language Pathology is a relatively new profession and is changing rapidly, it is vital to keep abreast of new information. Community Health Services Branch, Speech-Language Pathologists were given the opportunity to attend workshops during the year as well as some locally based one day inservices. Although no major changes are anticipated in the coming year, I hope to maintain the calibre of our services with the excellent participation of the Swift Current Health Region staff.

Maria Tuchscherer, M.S.
Speech-Language Pathologist

EARLY CHILDHOOD PSYCHOLOGY

1. The Early Childhood Psychologist continued to provide coverage for this Region in conjunction with the Moose Jaw Health Region. The time spent in this Region was approximately 30 percent. A full time position has been approved for this Region and recruitment was instigated. It is hoped that an appointment will be made soon.

2. One session was given to the Update Parenting Class, which is the series for parents who are expecting a baby, but already have one or more children. After this the series was cancelled because of lack of interest.

3. With the implementation of the preschool core services, the Early Childhood Psychologist provided inservice on the development screening component of the core.

4. Last fall the Early Childhood Psychologist assumed the chair of the Admissions and Review Committee of the Swift Current and District Early Childhood Intervention Program. This is a home based program providing services to handicapped children and their families. Twenty families receive services in this area.

5. Last fall the Early Child-Hood Psychologist assumed the chair of the Regional Early Childhood Co-ordinating Committee which was established to provide a mechanism whereby services to preschool handicapped youngsters are insured or co-ordinated. A provincial workshop was also attended which assessed value of these committees on a provincial basis.

Raymond Hertzog
Early Childhood Psychologist

CHIROPODY PROGRAM ANNUAL REPORT, 1985-86

Annual Report, April 1, 1985 - March 31, 1986

Staff:
Chiropodist - Dr. T. M. Wharton
Chiropody Assistant - Mrs. C. Sartison

Introduction

The Chiropody Program was officially initiated within the province on February 1, 1984, when the Honourable Graham Taylor announced that there would be 10 clinics set up, one within each Health Region, staffed by a Chiropodist and a Chiropody Assistant.

Any person who has foot problems and who may benefit from the services of a Chiropodist may receive such services upon referral from a Physician, Public Health Nurse, or a Home Care Nursing Co-ordinator.

Any resident of Saskatchewan who has a valid health services card will be able to receive these professional services at no charge. Where orthotics or special footwear will be required, these will be the individuals responsibility.

The practice of Chiropody deals with the diagnosis and treatment of diseases, injuries, and defects of the human foot by medical, mechanical and minor surgical means. This included the physical examination of the lower extremeties alone and in relation to the rest of the body. Foot diseases are treated in many ways including, physical therapy, minor surgury and the application of medication.

Scope of practice involves treatment of callosities, corns, pressure beratoses, conditions such as thickened nails, neglected nails, ingrown nails, fungal infections of the nails and/or skin, plantar warts, diabetic ulcers, structural and mechanical problems and injuries to the foot.

Services in the Swift Current Region

The main office is on the fourth floor of the E. I. Wood Building and the majority of patients are seen at that location. The office accommodation include two operatories, a work room and office and waiting room.

There are also two satellite clinics within the region, one at Maple Creek and the other in Shaunavon. The details are as follows:

Maple Creek	Community Health Services Office Hwy. #1 3rd Monday and following Tuesday of each month.
Shaunavon	Community Health Services Office 55 - 3rd Ave. E. 1st Wednesday and following Thursday of each month.

By appointment only. The dates may be subject to change.

These satellite clinics are not as well equipped and some patients may have to travel to the Swift Current Clinic to benefit from the full range of services.

The Chiropody Program contains an element of health education and the Chiropodist is available to talk to interested groups.

During the last 12 months a total of 13 presentations have been given.

We have seen a steady increase in the number of referrals during the course of the year and we are now approaching capacity with the number of patients we have on our caseload.

We have seen 1,100 patients now since the opening of the clinic and of these, 370 have been discharged.

I would like to thank my assistant, Mrs. Sartison, for all her hard work during the last twelve months. Without her help we would not have such a smooth running operation. Also my thanks to the clerical staff of the Health Region.

Respectfully Submitted,

Dr. T. M. Wharton
Chiropodist

NUTRITIONIST'S ANNUAL REPORT 1985 - 86

In June 1985, following a vacancy of ten months, the nutritionist position was filled to provide services to both the Swift Current and Moose Jaw Health Regions. The community and selected groups e.g. physicians and school district personnel were informed of the resumption of nutrition services through letters and announcements in local newspapers. The large geographical area to be served and the number of programs to be provided necessitated the establishment of definite priorities.

Nutrition Promotion Program

Providing the public with reliable nutrition information was considered to be the first priority. Director methods for meeting this priority included weekly newspaper columns, radio and television interviews, presentations to community groups, answering of written and telephone inquiries, and the distribution of printed materials. Indirectly this priority was met through providing consultation and assistance to other health professionals, teachers and community lay leaders who may also be distributing nutrition information.

Nutrition Education Program

Another priority was the provision of nutrition education programs to specific groups, in particular Public Health Nurses. This was accomplished through inservice programs and demonstration prenatal classes. Other groups receiving education program included Dental Plan Staff, Wheatland Homemakers, at Cypress Hills and Coteau Range Community Colleges, teen parents (Minto Centre), and family day care providers.

Nutrition Counselling

Although nutrition counselling does not constitute a major priority, the service is provided to primarily individuals referred by a Public Health Nurse. The Preschool Core Program instituted in 1985 is identifying young children who require nutrition intervention. The parents of these children may need assistance because, for example, the child has an allergy or is underweight.

Health Team Activities

Throughout the year, other activities which were not directly related to nutrition program but reflect the nutritionist's role as part of the health care team, took place. Of note, was the participation in the Consumer Relations Training Program and the subsequent presentation of Consumer Relations Course to Community Health and Mental Health staff members in both Health Regions and to the Dental Health staff in the Moose Jaw Health Region. The nutritionist also acted as a faciliator for the "Health Is It" training program for students from local schools.

Janet Ayer
Nutritionist

PERSONNEL

Swift Current Region
Regional Office
350 Cheadle Street
Swift Current
773-8301

Dr. J. N. Burkholder
Medical Health Officer

Mr. Lee Spencer
Regional Executive Director
Mrs. Dolores Ast
Regional Nursing Supervisor
(Transferred)

Mrs. Joan Whiteside
Regional Nursing Supervisor

Mr. Laurie Wright
Senior Public Health Inspector

Mr. John Bower
Public Health Inspector 11

Ms. Maria Tuchscherer
Speech-Language Pathologist

Ms. Janet Ayer
Nutritionist

Dr. Raymond Hertzog
Early Childhood Psychologist

Dr. Terence Wharton
Chiropodist

Mrs. Janette Pound
Senior Clerk Stenographer

Public Health Nurses

Mrs. Jennifer Heinrichs
Ms. Hazel Padfield
Mrs. Laurie Pilkey
Ms. Lorna Russell
Ms. June Schmidt
Ms. Deborah Schroeder
(Educational Leave)
Mrs. Bonnie Shaw

Chiropody Assistant

Mrs. Cathy Sartison

Public Health Inspectors

Mrs. Robin Galbraith
Mr. Christopher Brown (Temporary - Termination)
Ms. Donna Quan, Public Health Inspector Trainee (Termination)
Mr. Wendel Stroh (Casual)

Clerical

Mrs. Brenda Bergstrom
Mrs. Karleen Campbell
(nee Bellefeuille)
Mrs. Sally Wiens

Leader District Office
423 Main East, Leader
628-3701

Public Health Nurse

Mrs. Jeannine Schmaltz

Clerical

Mrs. Joan Nixon (Part-time)

Maple Creek District Office
Highway 21 South
Maple Creek
662 - 2687

Public Health Nurses

Mrs. Kathy Scherger
Mrs. Mary Wiseman

Public Health Inspector

Mr. Martin MacLeod (Resigned)

Clerical

Mrs. Geraldine Carson (Part-time)

PERSONNEL continued

Shaunavon District Office
55 - 3rd Avenue East
Shaunavon
297-2731

Public Health Nurses

Mrs. Marlette Lucas-Simpson
Ms Carolyn Gabriel (Transferred)
Mrs. Della Stumborg (Termination)

Public Health Inspector

Mr. Wilmer Cave (Temporary - Termination)

Clerical

Mrs. Beverly Goulet (Part-time)

MEDIA - THANKS and APPRECIATION

Gull Lake Advance
Leader Weekly News
Maple Creek News
Shaunavon Standard
The Southwest Booster
Swift Current Sun

Radio Stations

CJSN - Shaunavon
CKSW - Swift Current
CJGL-FM - Swift Current

Television Station

CJFB TV - Swift Current

SPECIAL THANKS

To clerical personnel who provide the essential support service of our staff. Thanks to all volunteers who have helped to carry out our Health Programs.

TABLE I

PUBLIC HEALTH NURSING STATISTICS

April 1, 1985 - March 31, 1986

Public Health Nursing	1985-86	1984-85	1983-84
Total number home visits	1344	2268	2354
Number CHC locations	28	28	30
Number CHC's Held (1 conference = 1/2 day)	1149	1060	1032
Total number nursing days	2154	2268	2678
Total number KM's travelled	114650	149093	147656
Prenatal Service			
Home Visits	41	68	84
Other Contacts	332	209	219
Prenatal Classes:			
Number Classes Held	115	146	191
Total Attendance	2122	2261	2968
Total mothers attended	1123	1177	1606
Total fathers attended	999	1084	1362
Postnatal Services			
Home Visits	218	372	469
Other Interviews (i.e. hospital, telephone)	828	829	956
Infant Services			
CHC attendance	2421	2691	2908
Home visits and other contacts/ interviews	834	905	928
Preschool Services			
CHC attendance	3220	3314	3056
Home visits and other contacts/ interviews	599	546	329
School Health Services			
Total School Enrollment	9222	9422	9262
Students seen	5562	8570	6383
Teacher-nurse conference (re students and program)	1294	1408	1288
Students discussed with parents	1393	1610	1111
Other student contacts	95	103	67

	1985-86	1984-85	1983-84
Immunization			
Infant - total immunization given	3868	4105	4192
DPT - 3rd dose	567	632	616
OPV - 3rd dose	604	657	635
Preschool (1st - 7th Birthday)			
Total immunization given	4317	3763	3456
DPT - recalls	1508	1305	1177
OPV - recalls	1625	1402	1241
MMR	821	713	674
Schools (7th Birthday - School Leaving)			
Total immunization given	1730	2038	1623
TD recalls	679	786	616
OPV recalls	706	857	658
Rubella	47	70	76
Mumps	10	2	-
MMR	223	246	-
Adult Services			
Home visits and contacts (over 65 years)	448	854	986
Home visits and contacts (other adults)	802	799	850
Total number Well Elderly Clinics (1 conference = 1/2 day)	71	135	132
Total attendance	640	1280	1271
Total immunization	368	309	248
Other Services			
Communicable Disease			
Home visits or other contact	169	244	130
Physically Handicapped and Mentally Ill Home Visits	70	132	109
Total Official Visits	1670	1562	1131
Referrals to other Agencies, Personnel	1134	1409	949
Total Group Education in which Public Health Nurses participated	53	99	75

TABLE II

PUBLIC HEALTH INSPECTION STATISTICS

	Number of Facilities	Number of Inspections and Visits	Percentage of Time Spent
Public Eating Establishments	209	415	13
Food Distribution	83	104	3
Food Processing	40	37	2
Liquor Outlets	51	61	2
Private Water Supply	0	0	1
Public Water Supply	51	10	1
Private Sewage Disposal	0	16	2
Hospitals	11	7	.5
Schools	80	1	0
Institutions	43	38	1
Housing	0	43	2
Mobile Home Courts	5	14	.5
Trailer Courts	12	19	1
Hotels	35	39	1
Motels	29	38	1
Industrial Facilities	0	28	1
Swimming Pools	33	86	4
Agricultural Facilities	0	7	.5
Personal Service Facilities	59	42	1
Recreational Facilities	66	62	2
Public Facilities	2	3	.5
Plumbing	0	320	7
Investigation			
TOTAL	812	1,426	49
General Services			21
Office			30

TABLE III EARLY CHILDHOOD PSYCHOLOGY: STATISTICS

1.	Type of Work	
	Casework	37.9 %
	Primary Prevention	0.5
	Consultation	6.8
	Community Development	21.5
	Research	-
	Inservice Education	0.8
	Travel	24.0
	Administration	8.3
	Total	100 %
2.	Details of Casework	
	Type of Problem	
	Developmental	4.3
	Behavioural	3.7
	Total number of visits	38
3.	Source of Referral of New Cases	
	Public Health Nurse	4
	Speech Therapist	5
	Parent(s)	7
	Other	6
4.	Consultation re children not formally referred or seen	60
5.	Number of Visits:	
	Regional Office	37
	Other	1

TABLE IV CHIROPODY PROGRAM: April 1, 1985 - March 31, 1986

SOURCE OF REFERRALS

	Categories* 1	2	3	4	Total	%
Physician	23	110	--	45	178	21.5
Public Health Nurse	12	35	3	3	53	6.4
Home Care Coordinator	37	139	2	26	204	24.7
Chiropodists	112	260	13	7	392	47.4
TOTAL	184	544	18	81	827	
% of patient load in each category	22.3	65.8	2.2	9.8		

PATIENT VISITS - REGIONAL TOTAL

	Categories* 1	2	3	4	Total	%
New	178	53	204	392	827	22.6
Return	614	274	914	1030	2832	77.4
TOTAL	792	327	1118	1422	3659	
%	21.7	8.9	30.6	38.9		

PATIENT VISITS - SWIFT CURRENT OFFICE

	Categories* 1	2	3	4	Total	%
New	133	42	163	307	645	20.7
Return	500	255	775	946	2476	79.3
TOTAL	633	297	938	1253	3121	
%	20.3	9.5	30.1	40.2		

PATIENT VISITS - MAPLE CREEK

	Categories*					
	1	2	3	4	Total	%
New	26	8	20	27	81	37.0
Return	60	4	47	27	138	63.0
TOTAL	86	12	67	54	219	
%	39.3	5.5	30.6	24.7		

PATIENT VISITS - SHAUNAVON

	Categories*					
	1	2	3	4	Total	%
New	19	3	21	58	101	31.7
Return	54	15	92	57	218	68.3
TOTAL	73	18	113	115	319	
%	22.9	5.6	35.4	36.1		

*Categories: (1) Medically at risk elderly
(2) Medically at risk general population
(3) Well elderly
(4) General population not medically at risk

Medically at Risk is defined as all acute and septic conditions related to the feet as well as patients with relevant systemic medical problems such as diabetes, arteriosclerosis, etc., which would impede mobility if chiropody services were not provided.

The Elderly are those people 65 years of age and older.

TABLE V

NUTRITION SERVICES STATISTICS

		HD#1	HD#2	Total
A.	**Nutrition Promotion Programs**			
1.	Presentations Community Groups (e.g. Lioness, T.O.P.S, Seniors)			
	number of sessions	10	3	13
	attendance	430	80	510
2.	Media			
a.	Newspaper articles			
	number of papers supplies	3	4	7
	number of articles supplied	weekly		52
b.	Newspaper interviews	2	1	3
c.	Radio programs	2	-	3
d.	Television interviews	1	-	1
3.	Public Inquiries	25	13	38
4.	Consultations (e.g. Public Health nurses, teachers, etc.)	84	48	132
B.	**Nutrition Education Programs**			
1.	Inservice - Public Health Nurses			
	number of sessions	2	2	4
	demonstration classes	-	2	2
	SRNA	1	-	1
	Consumer Relations Course	2	3	5
	Teachers	3	2	5
	Dental Plan	-	1	1
2.	Students - Community College			
	number of sessions	3	2	5
	attendance	59	23	82
	School - number of sessions	4	-	4
	attendance	54	-	54
	Hockey School - number of sessions	-	3	3
	attendance	-	90	90

	HD#1	HD#2	Total
3. Other agencies			
Homemakers	1	-	10
Mental Health	1	-	7
Day Care Providers	-	1	1
Minto Teen Parents	-	6	74
Food Handlers	1	-	11
C. Nutrition Counselling			
Child 0 - 5 years	5	6	11
Adult 20 - 65 years	1	-	1
Adult 65+	-	1	1

Appreciation is expressed to the members of the local Community Health Services Staff and to the other Public Health Nutritionists for their assistance, co-operation and encouragement during my first year in this position.

Respectfully submitted

Janet Ayer

TABLE VI

VITAL STATISTICS

	1985	1984	1983
* Population	48,749	49,208	48,681
Births	673	675	717
Birth Rate	13.8	13.7	14.7
Infant Deaths - 0 to 12 months	4	6	3
- under 28 days	4	3	0
- stillbirths	0	0	2
Infant Mortality Rate	5.93	8.89	4.18
Neonatal Mortality Rate	2.97	--	--
Perinatal Mortality Rate	2.97	4.44	2.78
Total Deaths	391	417	405
Crude Death Rate	8.55	8.5	8.3

(* Source - Saskatchewan Hospital Services Plan "Covered Population)

TABLE VII

NOTIFICATIONS OF COMMUNICABLE DISEASES

	Number of Cases Reported		
	1985	1984	1983
Campylobacter Infections	4	--	--
Chickenpox	80	279	8
Gastro-Enteritis	0	2	0
Giardiasis	1	47	0
Hepatitis A	0	2	1
Hepatitis B	2	1	1
Measles	0	2	0
Mononucleosis	0	3	0
Meningitis Bacterial	2	2	3
Para Pertussis	0	2	0
Paratyphoid	0	1	0
Pediculosis	8	92	6
Pertussis	0	2	0
Ringworm - Scalp	0	2	3
Salmonellosis	4	10	4
Scabies	8	3	2
Scarlet Fever	0	1	0
Sexually Transmitted Diseases - Syphilis	2	1	—
Gonorrhea	2	9	—
Tuberculosis	2	2	—

TABLE VIII

CAUSES OF DEATH

	1985			1984			1983		
	Total	Male	Female	Total	Male	Female	Total	Male	Female
All causes	391	221	170	417	242	175	405	242	163
Diseases of circulatory system	185	98	87	203	110	93	199	98	101
Cancer	75	40	35	77	47	30	83	54	29
Disease of respiratory system	40	28	12	50	33	17	38	24	14
Accidents	22	13	9	17	13	4	23	20	3
Certain causes of perinatal mortality	2	2	0	3	1	2	--	--	--
Diseases of digestive system	18	11	7	22	16	6	17	13	4
Endocrine and metabolic	9	6	3	6	2	4	15	10	5
Diseases of genito-urinary system	9	6	3	10	7	3	7	6	1
Diseases of nervous system	5	4	1	7	2	5	8	7	1
Blood diseases	1	0	1	3	2	1	1	0	1
Congenital anomalies	2	1	1	4	3	1	1	1	0
Suicide	8	7	1	7	3	4	6	6	0
Violence	1	1	0	2	1	1	1	1	0
All others	14	4	10	6	2	4	6	2	4